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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
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CORRESPONDENCE ADDRESS**

Application Number	10/779412
Filing Date	02/13/2004
First Named Inventor	Guillermo Bezan
Art Unit	1634
Examiner Name	SISSON, BRADLEY
Attorney Docket Number	86053/8146

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number

**NOTE:** This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

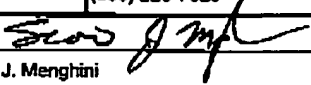
Client requested transfer to new attorneys.

**CORRESPONDENCE ADDRESS**

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**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Biotechnology Law Group		
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